

PLACE OF BIRTH

1. County of Gila
District of _____
Town of Globe
or Globe
City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 107
County Registrar No. _____
Local Registrar No. 61

No. _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number) St. _____ Ward _____

2. Full name of child Fredrico Aldaco

3. Sex of Child

male

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other _____

6. Legitimate?

yes

7. Date of birth April 2, 1928
Month day year

If child is not yet named, make
supplemental report, as directed.

8.

FATHER

Full name

Grimes M. Aldaco

9. Residence

(Usual place of abode)

If nonresident, give place and state

Globe, Ariz.

10. Color or race

Mexican

11. Age at last birthday 41 (Years)

12. Birthplace (city or place)

(State or country)

Mexico

13. Occupation

Nature of industry

Laborer

14.

MOTHER

Full maiden name

Martha Morales

15. Residence

(Usual place of abode)

If nonresident, give place and state

Globe, Ariz.

16. Color or race

Mexican

17. Age at last birthday 35 (Years)

18. Birthplace (city or place)

(State or country)

Silver City

New Mexico

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein
certified and including this child.)

(a) Born alive and now living five
(b) Born alive but now dead two
(c) Stillborn none

21. Were precautions taken against oph-
thalmia neonatorum?

yes

CERTIFICATE OF ATTENDING PHYSICIAN, OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was Born alive at 12:30 p.m. on the date above stated.
(Born alive or stillborn.)

*When there was no attending physician or
midwife, then the father, householder, etc.,
should make this return. A stillborn child
is one that neither breathes nor shows other
evidences of life after birth.

Given name added from
a supplemental report

Signature

T. C. Harper

(Physician or midwife)

Address

Globe, Arizona

Month, day, year.

Filed 3/10

1928

Local Registrar.

Registrar.

Filed _____

19 _____

County Registrar.

606-402-442